

1 / 63

FF1AN060.PDF

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

Chris Dodd For President Inc

Report Covering the Period

From: 06/01/2008

To: 06/30/2008

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	1447568.09
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	8835.09	10066886.95
(b) Political Party Committees	.....	0.00	100.00
(c) Other Political Committees	.....	5000.00	743198.30
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		13835.09	10810185.25
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	4739005.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	1302811.25
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	1302811.25
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	6923.94	106862.21
(b) Fundraising	.....	0.00	240.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		6923.94	107102.21
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	-110164.44	-87389.07
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	-89405.41	18319282.73
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	10744.38	15224014.54
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	1302811.25
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	1302811.25
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	11700.00	548312.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	45158.30
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	11700.00	593470.30
29. OTHER DISBURSEMENTS	.....	0.00	6000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	22444.38	17126296.09
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

3 / 63

1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	694906.41
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	2510621.08	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	68.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	3237582.71

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 / 63

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. David Chandler

Mailing Address

376 Kalthoff Common

City

Livermore

State

CA

Zip Code

94550-6462

FEC ID number of contributing
federal political committee.

Name of Employer
Sandia National Laboratory

Occupation
Scientist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A92F676162A204836A17

B.

Full Name (Last, First, Middle Initial)

Mr. Eugene Chen

Mailing Address

3801 Crail Dr.

City

Norman

State

OK

Zip Code

73072-2230

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A23218B20AEC54CCBADD

C.

Full Name (Last, First, Middle Initial)

Mr. Charles Clarkson

Mailing Address

961 Ponte Vedra Boulevard

City

Ponte Vedra Beach

State

FL

Zip Code

32082-3524

FEC ID number of contributing
federal political committee.

Name of Employer
The Clarkson Group

Occupation
Chairman

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

Transaction ID: AB7A793616F96448B949

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 63

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Holly Hassett

Mailing Address

3809 Woodbine Street

City

Chevy Chase

State

MD

Zip Code

20815-4958

FEC ID number of contributing
federal political committee.

Name of Employer

N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AA04399288D46480B8E5

B.

Full Name (Last, First, Middle Initial)

Ms. Rebecca Henderson

Mailing Address

5216 Lila Wood Circle

City

Charlotte

State

NC

Zip Code

28209-5536

FEC ID number of contributing
federal political committee.

Name of Employer

Wachovia

Occupation

Deputy General Counsel

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A7BE83636B8CD453BA89

C.

Full Name (Last, First, Middle Initial)

Mr. Eric Hirschhorn

Mailing Address

3204 Farmington Drive

City

Chevy Chase

State

MD

Zip Code

20815-4827

FEC ID number of contributing
federal political committee.

Name of Employer

Winston & Strawn LLP

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A9C1CE3DE356741B69D2

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 63

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Jon Christopher Hoeffel

Mailing Address

35 Wesskum Wood Road

City

Riverside

State

CT

Zip Code

06878-1903

FEC ID number of contributing
federal political committee.

Name of Employer
Bear Stearns

Occupation
Banker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A900DB95C25BD4ECCB4D

B.

Full Name (Last, First, Middle Initial)

Mr. Matthew Larocco

Mailing Address

513 S. Fayette Street

City

Alexandria

State

VA

Zip Code

22314-3901

FEC ID number of contributing
federal political committee.

Name of Employer
Arnold & Porter LLP

Occupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A2734633DB05346FDA89

C.

Full Name (Last, First, Middle Initial)

Ms. Margo Lion

Mailing Address

110 Riverside Drive

#6A

City

New York

State

NY

Zip Code

10024-3732

FEC ID number of contributing
federal political committee.

Name of Employer
Margo Lion LTD

Occupation
Producer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: AFF6D72CDE9D94921ADA

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 63

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Justin Ludwig

Mailing Address

425 Bellevue Way Se, Apt 65

City

Bellevue

State

WA

Zip Code

98004-6675

FEC ID number of contributing
federal political committee.

Name of Employer
Software AG

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A3E8E07A156764B3B81C

B.

Full Name (Last, First, Middle Initial)

Ms. Margo Nemeth

Mailing Address

110 Riverside Drive

#6A

City

New York

State

NY

Zip Code

10024-3732

FEC ID number of contributing
federal political committee.

Name of Employer
Margo Lion LTD

Occupation
Producer

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A82290569EFDA402EB2C

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Schacht

Mailing Address

1617 S. Beretania Street

#205

City

Honolulu

State

HI

Zip Code

96826-1107

FEC ID number of contributing
federal political committee.

Name of Employer
University of Hawaii

Occupation

Research Associate

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AA28E31A982E1429F81C

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 63

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mr. George Stevens, Jr.

Mailing Address

3050 Avon Lane

City

Washington

State

DC

Zip Code

20007-2908

FEC ID number of contributing
federal political committee.

Name of Employer
New Liberty Productions

Occupation
Writer/Producer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: AE44391947FD345428D6

B.

Full Name (Last, First, Middle Initial)

Mark Van Houtum

Mailing Address

4918 N. Talman

City

Chicago

State

IL

Zip Code

60625-2722

FEC ID number of contributing
federal political committee.

Name of Employer
self

Occupation
Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A8D24FFA8A8EB4A4A9A9

C.

Full Name (Last, First, Middle Initial)

n/a Unitemized Donors

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1985.09

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

1985.09

Unitemized Donors

Transaction ID: U24C133DA343E4321A7A

SUBTOTAL of Receipts This Page (optional)

3085.09

TOTAL This Period (last page this line number only)

8835.09

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 63

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Seafarers PAC

Mailing Address

5201 Auth Way

City

Camp Springs

State

MD

Zip Code

20746

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

5000.00

Transaction ID: A6FAF652BB5E74A2CA68

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 63

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Legal Action Center of the City of New York, Inc.

Mailing Address

225 Varick Street

4th Floor

City

New York

State

NY

Zip Code

10014-4304

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1745.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Amount of Each Receipt this Period

1745.06

purchase of equipment

Transaction ID: A79FE936661D84D4EBA0

B.

Full Name (Last, First, Middle Initial)

Mirando Chiropractic Center

Mailing Address

4530 Connecticut Avenue

City

Washington

State

DC

Zip Code

20008-4328

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Amount of Each Receipt this Period

1000.00

purchase of equipment

Transaction ID: ADE640C048FA54B419B5

C.

Full Name (Last, First, Middle Initial)

Teletch Communications Corporation

Mailing Address

9693 Gerwig Lane

Suite H

City

Columbia

State

MD

Zip Code

21046

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1138.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Amount of Each Receipt this Period

1138.00

refund on contract of un-
used s

Transaction ID: AC4449AC3335142A6A00

SUBTOTAL of Receipts This Page (optional)

3883.06

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 63

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address

P.O. Box 17577

City

Baltimore

State

MD

Zip Code

21297-0513

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

11665.08

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

2620.88

Transaction ID: A87DE64320006401AA37

B.

Full Name (Last, First, Middle Initial)

Mr. Dewayne Thomas

Mailing Address

10413 Woodlake Ct.

City

Spotsylvania

State

VA

Zip Code

22553-1859

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Amount of Each Receipt this Period

300.00

purchase of equipment

Transaction ID: A594B6E65DD79444E8B5

SUBTOTAL of Receipts This Page (optional)

2920.88

TOTAL This Period (last page this line number only)

6803.94

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 63

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Morgan Stanley Smith Barney

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Mailing Address

City Place 1

185 Asylum Street

City

State

Zip Code

Hartford

CT

06103

Amount of Each Receipt this Period

-110164.44									
------------	--	--	--	--	--	--	--	--	--

FEC ID number of contributing
federal political committee.

--	--	--	--	--	--	--	--	--	--

Name of Employer

Occupation

Interest

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

-87994.67									
-----------	--	--	--	--	--	--	--	--	--

Transaction ID: AF510298961FC439DAA2

SUBTOTAL of Receipts This Page (optional)

-110164.44

TOTAL This Period (last page this line number only)

-110164.44

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: B1AE313FF4EDA4534A6F Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	1		2	0	0	8												
City Auburn State ME Zip Code 04210 Purpose of Disbursement Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>155.66</td> </tr> </table>	155.66																			
155.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: B3013C208D8B64B9E98F Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	8												
City Auburn State ME Zip Code 04210 Purpose of Disbursement Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>70.34</td> </tr> </table>	70.34																			
70.34																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: B67F6B215C35E4E409DD Date of Disbursement																				
Mailing Address PO Box 981535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	0	8												
City El Paso State TX Zip Code 79998-1535 Purpose of Disbursement Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>94.50</td> </tr> </table>	94.50																			
94.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

320.50

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Anthem Blue Cross Blue Shield

Mailing Address 370 Bassett Road

City North Haven State CT Zip Code 06473-4201

Purpose of Disbursement

Health Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B30EEE358E19C424BAA3

Date of Disbursement

06 / 03 / 2008

Amount of Each Disbursement this Period

1764.27

B.

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 915 South 500 East, Ste. 200

City American Fork State UT Zip Code 84003-3373

Purpose of Disbursement

Fee

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B45629911AFBF430F8DB

Date of Disbursement

06 / 05 / 2008

Amount of Each Disbursement this Period

26.90

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 830175
Acct Analysis

City Dallas State TX Zip Code 75283-0175

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B90C124864EB24C978DA

Date of Disbursement

06 / 23 / 2008

Amount of Each Disbursement this Period

259.73

SUBTOTAL of Disbursements This Page (optional)

2050.90

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B53B6EDD9DD4A433AABB Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8 Amount of Each Disbursement this Period 72.19
B. Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7C6FCBBDC0AE4368BEE Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 243.47
C. Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City State Zip Code Hartford CT 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BC1303C0C91BD4E25AE0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 199.05

SUBTOTAL of Disbursements This Page (optional) ►

514.71

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) CT Dept Taxation	Transaction ID: BD6BE568E7110485C88F Date of Disbursement																				
Mailing Address 25 Sigourney St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	8												
City Hartford State CT Zip Code 06106	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">114.17</td> </tr> </table>	114.17																			
114.17																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) DC Dept Taxation	Transaction ID: B2B4DB3FD7EDF4286B6E Date of Disbursement																				
Mailing Address P.O. Box 470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	1		2	0	0	8												
City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">153.93</td> </tr> </table>	153.93																			
153.93																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) DC Dept Taxation	Transaction ID: BEE10382553B44FAD8DF Date of Disbursement																				
Mailing Address P.O. Box 470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	8												
City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">66.63</td> </tr> </table>	66.63																			
66.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

334.73

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address P.O. Box 8530

City
Philadelphia

State
PA

Zip Code
19162

Purpose of Disbursement
Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B3FBF943690194960A39

Date of Disbursement

06 / 01 / 2008

Amount of Each Disbursement this Period

2238.94

B.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address P.O. Box 8530

City
Philadelphia

State
PA

Zip Code
19162

Purpose of Disbursement
Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B2CC33CC1C92F4A8CBCA

Date of Disbursement

06 / 15 / 2008

Amount of Each Disbursement this Period

1191.67

C.

Full Name (Last, First, Middle Initial)

Morgan Stanley

Mailing Address One City Place
ATT: Ryan Kennedy

City
Hartford

State
CT

Zip Code
06103-3432

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B4CC9B1D25EBD4B9DBF6

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

13.00

SUBTOTAL of Disbursements This Page (optional)

3443.61

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Petty Cash	Transaction ID: BF3CFC27739534325848 Date of Disbursement																				
Mailing Address P.O. Box 270701	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City West Hartford State CT Zip Code 06127	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxi, parking, food & beverage	<table border="1"> <tr> <td>3</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td> </tr> </table>	3	1	0	0	0	0														
3	1	0	0	0	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
B. Full Name (Last, First, Middle Initial) USRental.com	Transaction ID: B8EFC72F2293642B39D3 Date of Disbursement																				
Mailing Address 970 Summer Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Stamford State CT Zip Code 06905-5542	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reversal of credit card charge	<table border="1"> <tr> <td>-</td><td>4</td><td>6</td><td>5</td><td>8</td><td>7</td><td>0</td> </tr> </table>	-	4	6	5	8	7	0													
-	4	6	5	8	7	0															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
C. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: BABF686DAF2274A069C0 Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	1		2	0	0	8												
City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td>1</td><td>7</td><td>1</td><td>0</td><td>0</td><td>1</td> </tr> </table>	1	7	1	0	0	1														
1	7	1	0	0	1																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

SUBTOTAL of Disbursements This Page (optional)

-2638.69

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: BBEBDB9E0C58A46AA9FB Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">139.00</td> </tr> </table>	139.00																			
139.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: B39B269C75AA94D02970 Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	8												
City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1710.01</td> </tr> </table>	1710.01																			
1710.01																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: BEC2FD52DEB3E4CDD9FD Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	6		2	0	0	8												
City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period																				
Purpose of Disbursement Reimb for travel expenses Candidate Name	<table border="1"> <tr> <td colspan="10">130.50</td> </tr> </table>	130.50																			
130.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

1979.51

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Emily Fetting	Transaction ID: B0F986E8221684250B27 Date of Disbursement
Mailing Address 513 Independence Avenue SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-1144	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1169.87</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Emily Fetting	Transaction ID: B041DDD4E6ACF4D7BAD7 Date of Disbursement
Mailing Address 513 Independence Avenue SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-1144	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1169.87</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Vincent Frillici	Transaction ID: BEB11C3D135B346B892C Date of Disbursement
Mailing Address 1100 H St., Ste.940 NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20005-5498	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1239.13</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3578.87

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 63

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ms. Euginia Gluzberg

Mailing Address 1380 Paradise Avenue

City
Hamden

State
CT

Zip Code
06514-1017

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B6ADE2FF8BD1847EE99F

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1160.24

SUBTOTAL of Disbursements This Page (optional)

1160.24

TOTAL This Period (last page this line number only)

10744.38

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 63

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Mr. Craig Baker

Mailing Address 183 Medway Street

City State Zip Code
Providence RI 02906-5201

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B5A8E9308305C445F8C4

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

800.00

B.

Full Name (Last, First, Middle Initial)
James Dimon

Mailing Address 1185 Park Avenue

City State Zip Code
New York NY 10128-1308

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: BFC91392109E0457491D

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

1700.00

C.

Full Name (Last, First, Middle Initial)
Fred Frederspiel

Mailing Address 12 Gerlach Place

City State Zip Code
Larchmont NY 10538-2721

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B6B129F1533BC4D2EB1B

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 63

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Gary Holloway	Transaction ID: B78E61A0616824F0C94B Date of Disbursement																				
Mailing Address 707 West Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	6		2	0	0	8												
City New Canaan State CT Zip Code 06840-2518	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Julie Holloway	Transaction ID: BAA0BE212BB0D4F1B8DE Date of Disbursement																				
Mailing Address 707 West Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	6		2	0	0	8												
City New Canaan State CT Zip Code 06840-2518	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) George Masaru	Transaction ID: BE3C8EA0D6B9E42DEB73 Date of Disbursement																				
Mailing Address 5300 Tucker Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	1		2	0	0	8												
City Charlotte State NC Zip Code 28269-1959	Amount of Each Disbursement this Period																				
Purpose of Disbursement Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 63

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mrs. Margaret M Syron

Mailing Address 67 Fairgreen Place

City

Chestnut Hill

State

MA

Zip Code

02467-2721

Purpose of Disbursement

Refund

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

2008

☐

Primary

☒

General

☐

Other (specify) ▼

Transaction ID: B0059FB0DC6564178B7D

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

11700.00

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 25 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

958.74

Transaction ID: D06FE0A4EF1384B299BD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

958.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

335.50

Transaction ID: D079F7773ED3A429F995

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

335.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

320.68

Transaction ID: DAB48C0D1D9BF48E2819

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

320.68

1) **SUBTOTALS** This Period This Page (optional).....

1614.92

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

1646.22

Transaction ID: D684E05F5028F4B9FA8C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1646.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

647.11

Transaction ID: DC05308729895455AAF0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

647.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

896.07

Transaction ID: D03866EA927C6487BAA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.07

1) **SUBTOTALS** This Period This Page (optional).....

3189.40

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

694.96

Transaction ID: D7AA2635D35294D99959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

694.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
REMAX Results Realty

Nature of Debt (Purpose):
Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code
Mason City IA 50401

Outstanding Balance Beginning This Period

1036.46

Transaction ID: D14F42980C9EF465D8A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone
Mailing Address Business Services
PO Box 91154
City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

669.82

Transaction ID: D6224518C358E4E34936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

669.82

1) **SUBTOTALS** This Period This Page (optional).....

2401.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 28 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

657.85

Transaction ID: D160BB52601F3469FBFA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

471.50

Transaction ID: DE70EBFB35F4E4F5BBA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

58.58

Transaction ID: DC07FD8583E3F4BA58CA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.58

1) **SUBTOTALS** This Period This Page (optional).....

1187.93

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

418.15

Transaction ID: DA397374A80A8418D9FD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

575.42

Transaction ID: DA3182C7E844C4F039CE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

431.46

Transaction ID: D703363A20B0E44A7A6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

431.46

1) **SUBTOTALS** This Period This Page (optional).....

1425.03

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 30 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

106.73

Transaction ID: DE2EA2BD913EF4C59A0F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

622.51

Transaction ID: DA75CCBF704CB4716B86

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

376.44

Transaction ID: DD1D454DB157C4318B67

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

376.44

1) SUBTOTALS This Period This Page (optional).....

1105.68

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 31 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

246.08

Transaction ID: DE82D6F912C4D47CB9A5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

246.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

993.78

Transaction ID: D5B30D2CCB1A941208DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

993.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Public Service of New HampshireNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 360

City State ZIP Code
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

131.82

Transaction ID: D5B0C3B4DA75E4096B6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

131.82

1) **SUBTOTALS** This Period This Page (optional).....

1371.68

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 32 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Air Charter Team, Inc.Nature of Debt (Purpose):
TransportationMailing Address 10015 N.W. Ambassador Drive
Suite 202City State ZIP Code
Kansas City MO 64153

Outstanding Balance Beginning This Period

1304.61

Transaction ID: DCAA2DBC5CEA94CD089C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1304.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Printer WorksNature of Debt (Purpose):
Printer

Mailing Address 3481 Arden Road

City State ZIP Code
Hayward CA 94545

Outstanding Balance Beginning This Period

819.44

Transaction ID: DFC2998A4374B4E86BCA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

819.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hinckley SpringsNature of Debt (Purpose):
Water Cooler Services

Mailing Address P.O. Box 660579

City State ZIP Code
Dallas TX 75266-0579

Outstanding Balance Beginning This Period

306.68

Transaction ID: DE674F26EC06645DDB95

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

306.68

1) SUBTOTALS This Period This Page (optional).....

2430.73

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 33 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Deaf Services Unlimited

Nature of Debt (Purpose):
Interpreting Service

Mailing Address Suite 170

City State ZIP Code
Des Moines IA 50309

Outstanding Balance Beginning This Period

130.00

Transaction ID: DF8A44964B3424CC3B77

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Des Moines Theatrical Shop

Nature of Debt (Purpose):
Costume Rental

Mailing Address 145 5th Street

City State ZIP Code
West Des Moines IA 50265

Outstanding Balance Beginning This Period

106.00

Transaction ID: D7952AAF64B9C4F0997B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Shippng

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

126.91

Transaction ID: D46BD2137637F4679A43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.91

1) **SUBTOTALS** This Period This Page (optional).....

362.91

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Simard PrintingNature of Debt (Purpose):
Printing Services

Mailing Address 300 Salem Street

City State ZIP Code
Woburn MA 01801-2055

Outstanding Balance Beginning This Period

433.13

Transaction ID: DAEB900B19D5343069F1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

433.13

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cox CommunicationsNature of Debt (Purpose):
Internet Services

Mailing Address PO Box 6059

City State ZIP Code
Cypress CA 90630

Outstanding Balance Beginning This Period

138.02

Transaction ID: DEAECEB41D358C496EAE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

138.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

416.01

Transaction ID: D91E4CB1724CB455C94A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

416.01

1) **SUBTOTALS** This Period This Page (optional).....

987.16

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 35 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

1115.75

Transaction ID: DEC21CC9229D5404F97B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1115.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

659.58

Transaction ID: DFC448EB6B1054323A65

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

659.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

72.04

Transaction ID: D275E706E6F7F4C6C938

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

72.04

1) **SUBTOTALS** This Period This Page (optional).....

1847.37

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 36 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

123.36

Transaction ID: DF30D747F375F47E5882

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

196.90

Transaction ID: DAB442CA849544E83A13

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

196.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

1406.57

Transaction ID: DB92957A464EF4AC685D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1406.57

1) SUBTOTALS This Period This Page (optional).....

1726.83

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 37 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican Energy

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

65.24

Transaction ID: D7B3E6DAFE5CE4AFB9B8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verham News

Nature of Debt (Purpose):
Rent

Mailing Address P.O. Box 706

City State ZIP Code
White Riv Jct VT 05001-0706

Outstanding Balance Beginning This Period

910.28

Transaction ID: DE2E3D979014F4B2194A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bi-State Cartridge Service, Inc.

Nature of Debt (Purpose):
Office Supplies

Mailing Address 1325 15th Street

City State ZIP Code
Moline IL 61265

Outstanding Balance Beginning This Period

130.54

Transaction ID: D163D453900874450889

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.54

1) **SUBTOTALS** This Period This Page (optional).....

1106.06

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 38 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
U.S. Express Inc.Nature of Debt (Purpose):
Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code
Landover MD 20785

Outstanding Balance Beginning This Period

160.24

Transaction ID: D80871DA60A7642ADAA1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Old Town Family RestaurantNature of Debt (Purpose):
Food & Beverage

Mailing Address 2107 Camanche Avenue

City State ZIP Code
Clinton IA 52732-6036

Outstanding Balance Beginning This Period

130.00

Transaction ID: D8B59DA12044449C0AE9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVADNature of Debt (Purpose):
Internet ServicesMailing Address Dept. 33408
PO BOX 39000City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1535.76

Transaction ID: D5E78BD6138D849C8A7B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1535.76

1) **SUBTOTALS** This Period This Page (optional).....

1826.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 39 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVADNature of Debt (Purpose):
Internet ServicesMailing Address Dept. 33408
PO BOX 39000City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1056.76

Transaction ID: D7FB209F7C488450BA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1056.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Home Front CommunicationsNature of Debt (Purpose):
Video

Mailing Address 1121 14th Street NW

City State ZIP Code
Washington DC 20005-5641

Outstanding Balance Beginning This Period

6000.00

Transaction ID: D9C275736AC4E46B69DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jocelyn Augustino PhotogrpaherNature of Debt (Purpose):
Photographer

Mailing Address 3416 Gunston Road

City State ZIP Code
Alexandria VA 22302-2134

Outstanding Balance Beginning This Period

69.00

Transaction ID: D0781506CE4AC48A0805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69.00

1) **SUBTOTALS** This Period This Page (optional).....

7125.76

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 40 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Des Moines Water Works

Nature of Debt (Purpose):
Utilities

Mailing Address 2201 George Flagg Parkway

City State ZIP Code
Des Moines IA 50321-1190

Outstanding Balance Beginning This Period

117.91

Transaction ID: D1475748209CF4A0092F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

117.91

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660720

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

22.28

Transaction ID: DF9E84213BC0C4FA4959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jim VanDusseldorp

Nature of Debt (Purpose):
Bus Servicing

Mailing Address 2406 15th Ave. N.

City State ZIP Code
Clear Lake IA 50428-2037

Outstanding Balance Beginning This Period

92.50

Transaction ID: DECE5259C4BB240ADBB7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.50

1) **SUBTOTALS** This Period This Page (optional).....

232.69

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 41 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
VFW Post 775Nature of Debt (Purpose):
Space Rental

Mailing Address 702 West Main Street

City State ZIP Code
Ottumwa IA 52501-2226

Outstanding Balance Beginning This Period

150.00

Transaction ID: D9F4487EF4F6F4DB6923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

304.30

Transaction ID: DD45DB76A7149485EADE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

304.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

1861.62

Transaction ID: DFE38B3A3574543178FC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1861.62

1) **SUBTOTALS** This Period This Page (optional).....

2315.92

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 42 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kilkenney'sNature of Debt (Purpose):
Food & Beverage

Mailing Address 300 West 3rd Street

City State ZIP Code
Davenport IA 52801-1208

Outstanding Balance Beginning This Period

220.00

Transaction ID: DE9F171102B294984BCD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Koch BrothersNature of Debt (Purpose):
CopierMailing Address 325 Grand Avenue
P.O. Box 1755City State ZIP Code
Des Moines IA 50306

Outstanding Balance Beginning This Period

126.82

Transaction ID: DFAE4308D10124EEDAE3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Koch BrothersNature of Debt (Purpose):
CopierMailing Address 325 Grand Avenue
P.O. Box 1755City State ZIP Code
Des Moines IA 50306

Outstanding Balance Beginning This Period

211.99

Transaction ID: D3C51D93654FD40B59BB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.99

1) SUBTOTALS This Period This Page (optional).....

558.81

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

PAGE 43 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Comcast

Nature of Debt (Purpose):
Cable & Internet

Mailing Address PO Box 1577

City State ZIP Code
Newark NJ 07101

Outstanding Balance Beginning This Period

351.30

Transaction ID: D3A3A16E658A34B44B21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

351.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Keyspan

Nature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

239.04

Transaction ID: DD0258CA80C884AB6960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Keyspan

Nature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

1481.16

Transaction ID: DDFA00C779CF445C8AA6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.16

1) **SUBTOTALS** This Period This Page (optional).....

2071.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

PAGE 44 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MoreSound Company

Nature of Debt (Purpose):
Sound Equipment

Mailing Address 102 North Street

City	State	ZIP Code
Jaffrey	NH	03452-5301

Outstanding Balance Beginning This Period

400.00

Transaction ID: D4310E2A2AC3D49AFB1C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Comcast

Nature of Debt (Purpose):
Cable Service

Mailing Address P.O. Box 3005

City	State	ZIP Code
Southeastern	PA	19398-3005

Outstanding Balance Beginning This Period

197.56

Transaction ID: D1327435AF7974016BBDD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ExxonMobil

Nature of Debt (Purpose):
Gasoline

Mailing Address P.O. Box 688938

City	State	ZIP Code
Des Moines	IA	50368-8938

Outstanding Balance Beginning This Period

241.86

Transaction ID: D303F42DD72104352BB3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

241.86

1) **SUBTOTALS** This Period This Page (optional).....

839.42

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 45 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ExxonMobilNature of Debt (Purpose):
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

429.36

Transaction ID: D2591D51138CC454BA3F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

429.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Geoff LuxenbergNature of Debt (Purpose):
Reimbursement for gas &
signatures

Mailing Address 249A New State Road

City State ZIP Code
Manchester CT 06042-7959

Outstanding Balance Beginning This Period

107.00

Transaction ID: D8E19BDBD0BE84CDFB6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NexGenNature of Debt (Purpose):
Utilities

Mailing Address 10500 Hickman Road Ste J

City State ZIP Code
Clive IA 50325-3706

Outstanding Balance Beginning This Period

224.86

Transaction ID: D2FBA9339003447ADB22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

224.86

1) SUBTOTALS This Period This Page (optional).....

761.22

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 46 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WHO Newsradio 1040

Nature of Debt (Purpose):
Recording Services

Mailing Address 2141 Grand Avenue

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

400.00

Transaction ID: D5CA66406DA5143F7848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant Energy

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

540.80

Transaction ID: D4DB84BA83BD34248B12

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

540.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant Energy

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

852.59

Transaction ID: D21C371285AF1401F9CB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

852.59

1) **SUBTOTALS** This Period This Page (optional).....

1793.39

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 47 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

254.12

Transaction ID: D637921B16CAA45B19B6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

254.12

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

50.75

Transaction ID: DF36117C0589D4D9C911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

401.72

Transaction ID: D5B3618F71E3745EC9DD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.72

1) **SUBTOTALS** This Period This Page (optional).....

706.59

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 48 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant Energy

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

239.60

Transaction ID: DE6029EBE091B415FB6D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant Energy

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

263.55

Transaction ID: DBA39930B48064589AB5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

263.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Free Media, Inc.

Nature of Debt (Purpose):
Reimbursement for Travel
Expenses
Mailing Address 777 West End Avenue
#5C
City State ZIP Code
New York NY 10025

Outstanding Balance Beginning This Period

635.01

Transaction ID: DF03B1B1603F54C5183C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

635.01

1) **SUBTOTALS** This Period This Page (optional).....

1138.16

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 49 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Free Media, Inc.Nature of Debt (Purpose):
Reimbursement for Phone
ExpensesMailing Address 777 West End Avenue
#5CCity State ZIP Code
New York NY 10025

Outstanding Balance Beginning This Period

150.09

Transaction ID: D142C4EE26CC3459DA22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The TelegraphNature of Debt (Purpose):
Subscription

Mailing Address PO Box 1008

City State ZIP Code
Nashua NH 03061

Outstanding Balance Beginning This Period

20.81

Transaction ID: D1D76CBB4EBC7498F81D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Interstate Power and Light Co.Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 5007

City State ZIP Code
Dubuque IA 52004-5007

Outstanding Balance Beginning This Period

250.36

Transaction ID: DF8C3EA191F814F5C94C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.36

1) SUBTOTALS This Period This Page (optional).....

421.26

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 50 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedar Rapids Municipal UtilitiesNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3255

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

165.81

Transaction ID: D9457B91CEE0540E8A08

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

165.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Newman and Leventhal Caterers, Inc.Nature of Debt (Purpose):
Caterer

Mailing Address 45 West 81st Street

City State ZIP Code
New York NY 10024-6025

Outstanding Balance Beginning This Period

2136.07

Transaction ID: D2FDEA7A6FB3F461FA7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2136.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
EmbarqNature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

1064.16

Transaction ID: DBF0B293CD60A40ED8E0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.16

1) **SUBTOTALS** This Period This Page (optional).....

3366.04

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 51 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

378.82

Transaction ID: DF4A4422265684FB29B9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

378.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

153.03

Transaction ID: D40B8D89E3ABE4545B3C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.03

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

364.55

Transaction ID: DC3EE07A89ADF414596B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

364.55

1) **SUBTOTALS** This Period This Page (optional).....

896.40

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 52 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

625.92

Transaction ID: D7AA61021F4A546ABB58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

625.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

285.25

Transaction ID: D59D402EB48494DF2B2C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

285.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

281.01

Transaction ID: DB59E8AD1B4CC46098EF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

281.01

1) **SUBTOTALS** This Period This Page (optional).....

1192.18

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 53 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

561.93

Transaction ID: DA1C685B9BFAF4CD7A76

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

561.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

660.55

Transaction ID: D0F58D7FEFA5B4E43939

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

660.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Washington Promotions & Printing

Nature of Debt (Purpose):
Printing
Mailing Address 5125 MacArthur Blvd. NW
Suite 14
City State ZIP Code
Washington DC 20016

Outstanding Balance Beginning This Period

5547.90

Transaction ID: DE815690D20EF4A6EB02

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5547.90

1) **SUBTOTALS** This Period This Page (optional).....

6770.38

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 54 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Big Ten Rentals, Inc.

Nature of Debt (Purpose):
Bases

Mailing Address 1820 Boyrum St

City State ZIP Code
Iowa City IA 52240-4555

Outstanding Balance Beginning This Period

34.82

Transaction ID: D9CE80039AE0F470B870

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

34.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Frontline Productions

Nature of Debt (Purpose):
Lighting & Video

Mailing Address 125 Hemlock Drive

City State ZIP Code
Deep River CT 06417

Outstanding Balance Beginning This Period

885.00

Transaction ID: DF269F8B8076845BAB94

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

885.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mason City Public Utilities

Nature of Debt (Purpose):
Utilities

Mailing Address 10 First Street Northwest

City State ZIP Code
Mason City IA 50401-3224

Outstanding Balance Beginning This Period

123.36

Transaction ID: DDE7D15C566704EE4997

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

1) **SUBTOTALS** This Period This Page (optional).....

1043.18

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 55 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Waste Management

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 756

City State ZIP Code
Des Moines IA 50303

Outstanding Balance Beginning This Period

266.02

Transaction ID: D13EE948ED74B4BE0B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

266.02

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Storefront Political Media

Nature of Debt (Purpose):
Photographer

Mailing Address 250 Sutter Street, Suite 650

City State ZIP Code
San Francisco CA 94108

Outstanding Balance Beginning This Period

537.08

Transaction ID: DDB39DC1EDB03445B8B5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

537.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mediacom

Nature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

19.14

Transaction ID: DBAEE80A9C8F14CBF964

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.14

1) **SUBTOTALS** This Period This Page (optional).....

822.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 56 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MediacomNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

92.37

Transaction ID: D34D4235A01F441BAA58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.37

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Heartland Flagpoles and FlagsNature of Debt (Purpose):
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code
Des Moines IA 50315

Outstanding Balance Beginning This Period

436.60

Transaction ID: D42D026888D4F47D198F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSNature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

434.09

Transaction ID: D93A99FFBC04A4242996

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

434.09

1) **SUBTOTALS** This Period This Page (optional).....

963.06

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 57 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

60.76

Transaction ID: D6EB2D896D8C64BA8AA9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

427.18

Transaction ID: DC7364FE5C9E54CCCA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

427.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Unitil

Nature of Debt (Purpose):
Utilities

Mailing Address PO BOX 2013

City State ZIP Code
Concord NH 03302

Outstanding Balance Beginning This Period

115.06

Transaction ID: D14B3EB6706674783815

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

115.06

1) **SUBTOTALS** This Period This Page (optional).....

603.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 58 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Northern Business MachinesNature of Debt (Purpose):
Rental

Mailing Address 24 Terry Avenue

City State ZIP Code
Burlington MA 01803

Outstanding Balance Beginning This Period

698.00

Transaction ID: DF72BE3ADBBB14CB9BC7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

698.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Grand ColonyNature of Debt (Purpose):
Lodging

Mailing Address 2824 Grand Avenue, #218

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

153.50

Transaction ID: D232577C9B94046BB9A9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

111.80

Transaction ID: D51DCEF2884624EE6A6A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

111.80

1) SUBTOTALS This Period This Page (optional).....

963.30

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 59 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PMI

Nature of Debt (Purpose):
Parking

Mailing Address Parking Management, Inc.
1725 DeSales Street NW

City State ZIP Code
Washington DC 20036-4406

Outstanding Balance Beginning This Period

465.00

Transaction ID: D8747457AA9894F1CB0C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

465.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPS

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

59.43

Transaction ID: DBA9563936FE04325AD0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Northland Trumbull, LLC

Nature of Debt (Purpose):
Rent

Mailing Address C/o Northland Investment Corporati
P.O. Box 845604

City State ZIP Code
Boston MA 02284

Outstanding Balance Beginning This Period

3850.00

Transaction ID: D27B30042D3C24348857

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

1) **SUBTOTALS** This Period This Page (optional).....

4374.43

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 60 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
IAFF FIREPACNature of Debt (Purpose):
Rental & Bus WrapMailing Address Attn: David B. Billy
1750 New York Ave, NWCity State ZIP Code
Washington DC 20006-5305

Outstanding Balance Beginning This Period

32233.24

Transaction ID: DE8437A16695047AC84E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32233.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The KirkwoodNature of Debt (Purpose):
Rent

Mailing Address 400 Walnut Street

City State ZIP Code
Des Moines IA 50309

Outstanding Balance Beginning This Period

757.17

Transaction ID: DF06ED48AFB25453C90A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

757.17

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSNature of Debt (Purpose):
Courier Service

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

86.50

Transaction ID: D42C8F3A7325E4A5A80E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

86.50

1) **SUBTOTALS** This Period This Page (optional).....

33076.91

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 61 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Peter NicholsNature of Debt (Purpose):
Consulting

Mailing Address 222 Stony Brook Road

City State ZIP Code
Hopewell NJ 08525-3003

Outstanding Balance Beginning This Period

15000.00

Transaction ID: D4C77B28E5B624D96B79

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedar Rapids Municipal UtilitiesNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3255

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

57.90

Transaction ID: D0E366AACBEEB484CB02

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

10000.00

Transaction ID: D76E8E67033CC4385B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

1) **SUBTOTALS** This Period This Page (optional).....

25057.90

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 62 / 63

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Northland Trumbull, LLCNature of Debt (Purpose):
RentMailing Address C/o Northland Investment Corporati
P.O. Box 845604City State ZIP Code
Boston MA 02284

Outstanding Balance Beginning This Period

3850.00

Transaction ID: D62DA2D977A734EC594A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

312.07

Transaction ID: DD365AF099EC8458EBE5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

312.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Northland Trumbull, LLCNature of Debt (Purpose):
RentMailing Address C/o Northland Investment Corporati
P.O. Box 845604City State ZIP Code
Boston MA 02284

Outstanding Balance Beginning This Period

3850.00

Transaction ID: DA4696BC628A349F7971

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3850.00

1) **SUBTOTALS** This Period This Page (optional).....

8012.07

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 63 / 63

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Voxel.net inc

Nature of Debt (Purpose):
Web Hosting

Mailing Address 29 Broadway, 30th Floor

City State ZIP Code
New York NY 10006-3216

Outstanding Balance Beginning This Period

2459.50

Transaction ID: DC06AE5CA3EED49569AE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2459.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wired for Change, Inc.

Nature of Debt (Purpose):
Internet Services
Mailing Address 1700 Connecticut Ave., NW
Suite 403
City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

4000.00

Transaction ID: DA09D2641F3154B62833

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Voxel.net inc

Nature of Debt (Purpose):
Web Hosting

Mailing Address 29 Broadway, 30th Floor

City State ZIP Code
New York NY 10006-3216

Outstanding Balance Beginning This Period

4919.00

Transaction ID: DF06FD864428E4C118ED

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4919.00

1) **SUBTOTALS** This Period This Page (optional).....

11378.50

2) **TOTALS** This Period (last page this line number only).....

139067.25

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

139067.25